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PTO/SB/22 (09-09)
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PETITION FOR EXTENSION OF TIME UNDER	Docket Number (Option	al)	
FY 2006 (Fees pursuent to the Consolidated Appropriations Act	10015-pa	RE CENTRA	
Application Number 09/592,087		Filed June 12, 2	
For Automated Competitive Bidding	System and Pro	cess	UU
Art Unit 3624		Examiner Jagdish	Pate1
This is a request under the provisions of 37 CFR 1.13 application.	6(a) to extend the peri	od for filing a reply in the	above identified
The requested extension and fee are as follows (chec	k time period desired a	and enter the appropriate	foo boloud:
	<u>Fee</u>	Small Entity Fee	ries selow).
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
Two months (37 CFR 1,17(a)(2))	\$450	\$225	\$
X Three months (37 CFR 1.17(a)(3))	\$1020	\$510	s 510
Four months (37 CFR 1.17(a)(4))	\$1690	\$795	s·
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR	1.27,		
A check in the amount of the fee is enclosed			
Payment by credit card. Form PTO-2038 is a			
The Director has already been authorized to	•	polication to a Denosi	Account
The Director is hereby authorized to charge a			
Deposit Account Number 3011/6	h have	enclosed a duplicate	copy of this sheet.
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lam the applicant/inventor			ı
assignee of record of the entire Statement under 37 CFR 3.	interest. See 37 CF 73(b) is enclosed (Fi	R 3,71. om PTO/SB/96).	
attorney or agent of record. Re	gistration Number _	•	_
attorney or agent under 37 CFF Registration number if acting under	R 1.34. r 37 CFR 1.34 <u>44</u> ,	942	
CUYAUYAV	\	October 19.	2006
-		Da	rte
Audrey A. Millemann Typed or printed name	916-558-6033 Telephone Number		
	No. 1-4		
NOTE: Signatures of all the inventors or essignees of record of the enti- signature is required, see below.	re interest, or their represents	stive(s) are required. Submit mu	litiple forms if more than one
X Total of 1 forms are	submitted.		

This collection of information is required by 37 CFR 1.138(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is authorised to take 8 minutes to complete, including pathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademerk Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patenta, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/08/2004.			U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE appoint to a collection of information unless it displays a valid OMB control number Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL		Application Nu		09/592,087			
			4L	Filing Date		June 12, 2000	——————————————————————————————————————
For FY 2006		First Named In	rventor	Tariq Khalidi	CENT		
Applicant claims sm	all entity state	F See 37 CED 4		Exeminer Nam		Jagdish Patel	00
				Art Unit		3624	<u> </u>
TOTAL AMOUNT OF PA	YMENT (S	5) 510		Attorney Dock	et No.	10015-pa	· · · · · · · · · · · · · · · · · · ·
METHOD OF PAYME	NT (check a	Il that apply)					
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Deposit Account					(please ide		
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		e(s) or underpayme			It any ove	rpayments	
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FEE CALCULATION							
1. BASIC FILING, SEA	RCH. AND	FXAMINATION	EEEe				
,	FILING	FEES		H FEES	FXAM	INATION FEES	
Application Type	Fee (\$)	Fee (\$)		Small Entity		Small Entity	
Utility	300	150	Fee (\$) 500	Fee (\$)	Fee (_ ~	Fees Paid (\$)
Design	200	100	100	250	200	100	
Plant	200	100	300	50	130	65	
Reissue	300	150	500	150	160	80	
Provisional	200	100	.0	250	600	300	
2. EXCESS CLAIM FE		100		0	0	0	
Fee Description						Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (Each independent cla	including R	cissues)				50	25
Multiple dependent	annover 5 (claims	mending Kelssu	cs)			200	100
Total Claims	Extra Ciain	<u> Fee (\$)</u>	Fee P	ald (\$)		360 Multiple Do	180 pendent Claims
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						mall entity) for e	each additional 50
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4. OTHER FEE(S) Non-English Specific	cation \$13	30 fee (ne emell	. د د دادم				Fees Paid (\$)
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	Mey C		MAN (AR	gistration No. omey/Agent) 44	,942	Telephone	916-558-6033
ame (Print/Type) Audrey A.	Millemann						

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